

09/09/01 424

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| 0002/PTO(modified) Rev. 10/2001 | U.S. Department of Commerce Patent and Trademark Office | Complete if Known | |
| | | Application Number | Not Yet Known |
| | | Filing Date | October 4, 2001 |
| | | First Named Inventor | Chris E. Matichuk |
| | | Group Art Unit | Not Yet Known |
| | | Examiner Name | Not Yet Known |
| TOTAL AMOUNT OF PAYMENT Subtotal (1) + Subtotal (2) + Subtotal (3) = | | (\$1,436) | Attorney Docket Number 22407-05676US |

| METHOD OF PAYMENT | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p>1. The Commissioner is hereby authorized to:</p> <p><input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account.</p> <p><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.¹</p> <p><input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> | | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code/Fee</th> <th>Small Entity Fee Code/Fee</th> <th>Fee Description</th> <th>Fee Due</th> </tr> </thead> <tbody> <tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month¹</td><td></td></tr> <tr><td>116/\$400</td><td>216/\$200</td><td>Extension for response within second month¹</td><td></td></tr> <tr><td>117/\$920</td><td>217/\$460</td><td>Extension for response within third month¹</td><td></td></tr> <tr><td>118/\$1,440</td><td>218/\$720</td><td>Extension for response within fourth month¹</td><td></td></tr> <tr><td>128/\$1,960</td><td>228/\$980</td><td>Extension for response within fifth month¹</td><td></td></tr> <tr><td>119/\$320</td><td>219/\$160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>141/\$1,280</td><td>241/\$640</td><td>Petition to revive unintentionally abandoned application</td><td></td></tr> <tr><td>142/\$1,280</td><td>242/\$640</td><td>Utility Issue Fee (Or Reissue)</td><td></td></tr> <tr><td>143/\$460</td><td>243/\$230</td><td>Design Issue Fee</td><td></td></tr> <tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>126/\$180</td><td>126/\$180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>179/\$740</td><td>279/\$370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146/\$740</td><td>246/\$370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149/\$740</td><td>249/\$370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td colspan="2">SUBTOTAL (1) (\$1,436)</td><td colspan="2">Other fee (specify):</td><td></td></tr> <tr><td colspan="2"></td><td colspan="2">Other fee (specify):</td><td></td></tr> <tr><td colspan="2"></td><td colspan="2">SUBTOTAL (3) (\$0.00)</td><td></td></tr> <tr> <td colspan="2"> <p>2. 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| 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115/\$110 | 215/\$55 | Extension for response within first month ¹ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 116/\$400 | 216/\$200 | Extension for response within second month ¹ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 117/\$920 | 217/\$460 | Extension for response within third month ¹ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 118/\$1,440 | 218/\$720 | Extension for response within fourth month ¹ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 128/\$1,960 | 228/\$980 | Extension for response within fifth month ¹ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 119/\$320 | 219/\$160 | Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 141/\$1,280 | 241/\$640 | Petition to revive unintentionally abandoned application | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 142/\$1,280 | 242/\$640 | Utility Issue Fee (Or Reissue) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 143/\$460 | 243/\$230 | Design Issue Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 122/\$130 | 122/\$130 | Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 126/\$180 | 126/\$180 | Submission of Information Disclosure Statement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 179/\$740 | 279/\$370 | Request for Continued Examination (RCE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 146/\$740 | 246/\$370 | Filing a submission after final rejection (37 CFR 1.129(a)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 149/\$740 | 249/\$370 | For each additional invention to be examined (37 CFR 1.129(b)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) (\$1,436) | | Other fee (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | SUBTOTAL (3) (\$0.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>2. CLAIMS</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code/Fee</th> <th>Small Entity Fee Code/Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr> <tr><td>102/\$84</td><td>202/\$42</td><td>Independent claims in excess of 3</td></tr> <tr><td>104/\$280</td><td>204/\$140</td><td>Multiple dependent claim</td></tr> <tr><td>109/\$84</td><td>209/\$42</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> | | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | 103/\$18 | 203/\$9 | Claims in excess of 20 | 102/\$84 | 202/\$42 | Independent claims in excess of 3 | 104/\$280 | 204/\$140 | Multiple dependent claim | 109/\$84 | 209/\$42 | Reissue independent claims over original patent | 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | <table border="1"> <thead> <tr> <th>(Col. 1) For</th> <th>(Col. 2) No. of Existing Claims minus*</th> <th>(Col. 3) Highest No. Previously Paid For 20 or 0</th> <th>Extra**</th> <th>Fee</th> <th>Fee Due</th> </tr> </thead> <tbody> <tr><td>TOTAL</td><td>40</td><td>= 20</td><td>x 18</td><td>= 360</td></tr> <tr><td>INDEP</td><td>7</td><td>= 3 or 0</td><td>x 84</td><td>= 336</td></tr> <tr><td colspan="6">[] First presentation of multiple dependent claim</td></tr> </tbody> </table> | | | (Col. 1) For | (Col. 2) No. of Existing Claims minus* | (Col. 3) Highest No. Previously Paid For 20 or 0 | Extra** | Fee | Fee Due | TOTAL | 40 | = 20 | x 18 | = 360 | INDEP | 7 | = 3 or 0 | x 84 | = 336 | [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103/\$18 | 203/\$9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102/\$84 | 202/\$42 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104/\$280 | 204/\$140 | Multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 109/\$84 | 209/\$42 | Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Col. 1) For | (Col. 2) No. of Existing Claims minus* | (Col. 3) Highest No. Previously Paid For 20 or 0 | Extra** | Fee | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | 40 | = 20 | x 18 | = 360 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INDEP | 7 | = 3 or 0 | x 84 | = 336 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | SUBTOTAL (2) (\$696) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | ** Subtract the greater number of Col. 2 ** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| SUBMITTED BY | | Complete (if applicable) | |
|-----------------------|------------------|--------------------------|-----------------|
| Typed or Printed Name | Martin S.C. Loui | Reg. Number | 43,411 |
| Signature | Martin S.C. Loui | Date | OCTOBER 4, 2001 |

¹ Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby